

## ISSUE SLIP STAPLE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	N/A		07/18/01
O.I.P.E. CLASSIFIER			8 7-2501
FORMALITY REVIEW	S/M	859	08-17-01
RESPONSE FORMALITY REVIEW	MN	778	1/10/02
	BZ	897	02-22-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	8/15/01
1	X N
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7	
8	✓
9	N
10	✓
11	N
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19	✓
20	N
21	✓
22	N
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29	✓
30	X N
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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